

01/07/02
jc971 U.S. PTO

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PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	12293/69
	First Inventor or Application Identifier	Lewin
	Title	Extending An Internet Content Delivery*
	Express Mail Label No.	EJ782404286US

APPLICATION ELEMENTS	ADDRESS TO: Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 26] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 7]	ACCOMPANYING APPLICATION PARTS 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other:
4. Oath or Declaration [Total Pages 4] <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy) <i>one unsigned</i>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	
* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).	

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____
Prior application information: Examiner _____ Group / Art Unit: _____
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. **CORRESPONDENCE ADDRESS**

☐ Customer Number or Bar Code Label _____ or ☒ Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name	David H. Judson, Reg. No. 30,467				
	Assistant General Counsel - Intellectual Property				
Address	500 Technology Square				
City	Cambridge	State	MA	Zip Code	02139
Country		Telephone	617-613-2663	Fax	617-250-3685

Name (Print/Type)	David H. Judson	Registration No. (Attorney/Agent)	30,467
Signature	<i>David H. Judson</i>	Date	1/7/2002

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* Network Into An Enterprise

01/07/02

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PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 740.00)

Complete if Known

Application Number
Filing Date January 7, 2002
First Named Inventor Lewin
Examiner Name
Group Art Unit
Attorney Docket No. 12293/69

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number 501,269
- Deposit Account Name Akamai Technologies, Inc.
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27
2. ☐ Payment Enclosed:
- ☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE					
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
101 710	201 355	Utility filing fee	740.00		
106 320	206 160	Design filing fee			
107 490	207 245	Plant filing fee			
108 710	208 355	Reissue filing fee			
114 150	214 75	Provisional filing fee			
SUBTOTAL (1)			(\$ 740.00)		

2. EXTRA CLAIM FEES					
Total Claims	Extra Claims	Fee from below	Fee Paid		
Independent Claims	-20** =	X			
Multiple Dependent	-3** =	X			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
103 18	203 9	Claims in excess of 20	
102 80	202 40	Independent claims in excess of 3	
104 270	204 135	Multiple dependent claim, if not paid	
109 80	209 40	** Reissue independent claims over original patent	
110 18	210 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

*for number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES					
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
105 130	205 65	Surcharge - late filing fee or oath			
127 50	227 25	Surcharge - late provisional filing fee or cover sheet			
139 130	139 130	Non-English specification			
147 2,520	147 2,520	For filing a request for <i>ex parte</i> reexamination			
112 920*	112 920*	Requesting publication of SIR prior to Examiner action			
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action			
115 110	215 55	Extension for reply within first month			
116 390	216 195	Extension for reply within second month			
117 890	217 445	Extension for reply within third month			
118 1,390	218 695	Extension for reply within fourth month			
128 1,890	228 945	Extension for reply within fifth month			
119 310	219 155	Notice of Appeal			
120 310	220 155	Filing a brief in support of an appeal			
121 270	221 135	Request for oral hearing			
138 1,510	138 1,510	Petition to institute a public use proceeding			
140 110	240 55	Petition to revive - unavoidable			
141 1,240	241 620	Petition to revive - unintentional			
142 1,240	242 620	Utility issue fee (or reissue)			
143 440	243 220	Design issue fee			
144 600	244 300	Plant issue fee			
122 130	122 130	Petitions to the Commissioner			
123 50	123 50	Processing fee under 37 CFR 1.17(q)			
126 180	126 180	Submission of Information Disclosure Stmt			
581 40	581 40	Recording each patent assignment per property (times number of properties)			
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))			
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))			
179 710	279 355	Request for Continued Examination (RCE)			
169 900	169 900	Request for expedited examination of a design application			
Other fee (specify)					
SUBTOTAL (3)			(\$)		

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	David H. Hudson	Registration No. (Attorney/Agent)	30,467
Signature		Telephone	(617)613-2663
		Date	January 7, 2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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CERTIFICATE OF MAILING BY "EXPRESS MAIL" UNDER 37 CFR § 1.10

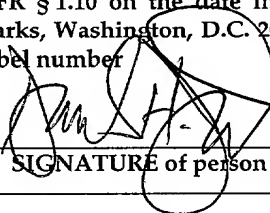
"EXPRESS MAIL" mailing label number: *EJ 782404286US*

Date of Mailing: January 7, 2002

I hereby certify that I have caused the documents indicated below to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" under 37 CFR § 1.10 on the date indicated above and are addressed to the Assistant Commissioner of Patents & Trademarks, Washington, D.C. 20231 and mailed on the above Date of Mailing with the above "Express Mail" mailing label number

David H. Judson

Typed or printed name of person mailing paper or fee


SIGNATURE of person mailing paper or fee

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